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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/972,582
	Filing Date	October 5, 2001
	First Named Inventor	Sarvajit CHAKRAVARTY
	Art Unit	1624
	Examiner Name	H. Liu
	Attorney Docket Number	219002028402

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

[x] all the attorneys/agents of record.

[ ] the attorneys/agents (with registration numbers) listed on the attached paper(s), or

[ ] the attorneys/agents associated with Customer Number [   ]

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Client requested transfer

CORRESPONDENCE ADDRESS

1. [ ] The correspondence address is NOT affected by this withdrawal.

2. [x] Change the correspondence address and direct all future correspondence to:

[ ] The address associated with Customer Number: [   ]

OR

| [X] Firm or Individual Name | Mark Warfield   Associate Patent Counsel |
| | Johnson & Johnson |

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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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